

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214502873						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Leidos, Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX ROAD, SUITE 285 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 2/28/2014</p> <p>SCC ID NO: F0448912</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	10,000		
CLASS	AUTHORIZED							
COMMON	10,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 11951 Freedom Drive</p> <p style="margin-left: 40px;">CITY/ST/ZIP: Reston, VA 20190</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%;"></td> <td style="width: 20%; text-align: center;"><input checked="" type="checkbox"/> OFFICER</td> <td style="width: 25%; text-align: center;"><input checked="" type="checkbox"/> DIRECTOR</td> </tr> <tr> <td> NAME: JOHN P. JUMPER TITLE: CEO ADDRESS: 1710 SAIC DRIVE, MS 1-14-2 CITY/ST/ZIP/CO: MCLEAN, VA 22102 </td> <td></td> <td></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	NAME: JOHN P. JUMPER TITLE: CEO ADDRESS: 1710 SAIC DRIVE, MS 1-14-2 CITY/ST/ZIP/CO: MCLEAN, VA 22102		
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	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: MARYANN K. CURTIN TITLE: ASST VP ADDRESS: 3465 BOX HILL CORPORATE CENTER DRIVE CITY/ST/ZIP/CO: ABINGDON, MD 21009								
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	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: DEBORAH L. JAMES TITLE: Sr. Consultant ADDRESS: 1710 SAIC DRIVE CITY/ST/ZIP/CO: MS 1-14-2 MCLEAN, VA 22102								
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	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR						
NAME: BARRY S. LANGER TITLE: VICE PRESIDENT ADDRESS: 155 PASSAIC AVENUE CITY/ST/ZIP/CO: FAIRFIELD, NJ 07004								

NAME:	VINCENT A. MAFFEO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/GC/ASST SEC		
ADDRESS:	1710 SAIC DRIVE		
CITY/ST/ZIP/CO:	MCLEAN, VA 22102		
NAME:	MARC H. CROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, Treasurer		
ADDRESS:	8301 Greensboro Drive		
CITY/ST/ZIP/CO:	McLean, VA 22102		
NAME:	FELICIA L. FARAGASSO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1710 SAIC DRIVE, MS 3-5-9		
CITY/ST/ZIP/CO:	MCLEAN, VA 22102		
NAME:	LAURA K. KENNEDY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Consultant		
ADDRESS:	1710 SAIC DRIVE, MS T1-14-2		
CITY/ST/ZIP/CO:	MCLEAN, VA 22102		
NAME:	JAMES S. KENNEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1710 SAIC DRIVE		
CITY/ST/ZIP/CO:	MS 3-5-9 MCLEAN, VA 22102		
NAME:	ANDREW N. PETRAKES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10260 CAMPUS POINT DRIVE, MS D7S		
CITY/ST/ZIP/CO:	SAN DIEGO, CA 92121		
NAME:	CLEMENT VINCENT QUELLA III	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	8301 Greensboro Drive		
CITY/ST/ZIP/CO:	McLean, VA 22102		
NAME:	MARK A. ROWLAND	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10260 CAMPUS POINT DRIVE		
CITY/ST/ZIP/CO:	MS D7S SAN DIEGO, CA 92121		
NAME:	K. STUART SHEA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	President/COO		
ADDRESS:	1710 SAIC DRIVE		
CITY/ST/ZIP/CO:	MS T1-12-5 MCLEAN, VA 22102		
NAME:	MARK W. SOPP	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP / CFO		
ADDRESS:	1710 SAIC Drive		
CITY/ST/ZIP/CO:	M/S 1-14-2 McLean, VA 22102		

NAME:	RAYMOND L. VELDMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1710 SAIC Drive		
CITY/ST/ZIP/CO:	MS 1-14-1 McLean, VA 22102		
NAME:	JOHN J. HAMRE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	CENTER FOR STRATEGIC & INTERNATIONAL STUDIES		
CITY/ST/ZIP/CO:	1800 K STREET NW, SUITE 400 WASHINGTON, DC 20006		
NAME:	MIRIAM E. JOHN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	SANDIA NATIONAL LABORATORIES		
CITY/ST/ZIP/CO:	7011 EAST AVENUE, MS9001 LIVERMORE, CA 94550		
NAME:	ANITA K. JONES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	QUILL SPRING, 3897 FREE UNION ROAD		
CITY/ST/ZIP/CO:	CHARLOTTESVILLE, VA 22901		
NAME:	HARRY M. JANSEN KRAEMER JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1200 CENTRAL AVENUE		
CITY/ST/ZIP/CO:	SUITE 306 WILMETTE, IL 60091		
NAME:	LAWRENCE C. NUSSDORF	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	CLARK ENTERPRISES, INC.		
CITY/ST/ZIP/CO:	7500 OLD GEORGETOWN ROAD, 15TH FLOOR BETHESDA, MD 20814		
NAME:	Sarah K. Allen	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP, CHRO		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Michele M. Brown	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, Asst. GC		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Christopher J. Buffoni	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, ESD		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Jeffrey H. Cook	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, Corp. FP&A		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		

NAME:	Kimberly D. Denver	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, CCO		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Shad Evans	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Strat. Fin Dir.		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	David G. Fubini	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Sukhdeep (Gulu) S Gambhir	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, Chief Tech		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Charles L. Kanewske	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, ENT Risk		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Judith A Kim	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, Ethics		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Theodore W Lay, II	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, Ethics,Com		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Brian Z. Liss	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Robert R. Logan	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, CIO		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Kristine E. Petka	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, Chief Proc		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Kirk A. Poulsen	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, CSO		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		

NAME:	George B. Reiter	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, TRD		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Robert S. Shapard	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Kenneth P. Sharp	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, Controller		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Kyle Spainhour	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, Dir of IA		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	John Sweeney	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP, Inve. Rltn		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	John Thomas	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP, CSO		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
NAME:	Lewis F. Von Thae	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	Sector Pres.		
ADDRESS:	1710 SAIC Drive		
CITY/ST/ZIP/CO:	McLean, VA 22102		
NAME:	Noel B. Williams	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11951 Freedom Drive		
CITY/ST/ZIP/CO:	Reston, VA 20190		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ CLEMENT VINCENT QUELLA III	CLEMENT VINCENT QUELLA III,	1/7/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ASST SECRETARY	DATE	
	PRINTED NAME AND CORPORATE TITLE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			